

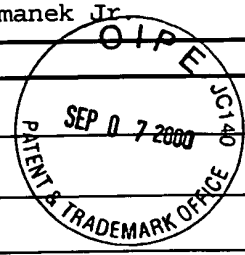
#3

PTO/SB/01 MODIFIED BY AT&T CORP.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☒ Declaration submitted after Initial Filing

Attorney Docket Number	2685/5248
First Named Inventor	Charles Robert Kalmanek Jr
COMPLETE IF KNOWN	
Application Number	09/469,791
Filing Date	12/22/1999
Group Art Unit	2742
Examiner Name	



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A Method For Performing Segmented Resource Reservation

(Title of Invention)

the specification of which

- ☐ is attached hereto
OR
☒ was filed on 12/22/1999 as United States Application Number or PCT International Application Number 09/469,791 and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date(MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

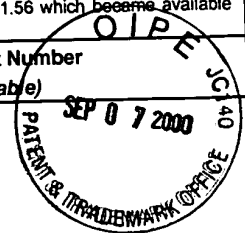
SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

Attorney Docket Number: 2685/5248

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which becomes available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)



☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CONOVER, Michele L.	34962	DELACRUZ, Cedric G	36498
DWORETSKY, Samuel H.	27873	GARG, Rohini K	45272
LEE, Benjamin S.	42787	LEVY, Robert B.	28234
MCHALE, Susan E.	35948	MONKA, Gary H.	35290
NAVON, Jeffrey M	32711	RESTAINO, Thomas A.	33444

☒ I also appoint the following additional registered practitioner(s) named on the supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto with full power to prosecute said application, to make alterations and amendments therein, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

NAME	Samuel H. Dworetsky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor

☐ A petition has been filed for this unsigned inventor

Name	Charles Robert Kalmanek Jr.		
Signature	<i>Charles Robert Kalmanek Jr.</i>	Date	2 Jun 00
Citizenship	United States		
Address (line 1)	86 Great Hills Road		
Address (line 2)	Short Hills		
Address (line 3)	Essex County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07078		

☒ Additional Inventors are being named on the 3 separately numbered sheets attached hereto

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Attorney Docket Number: 2685/5248

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page of**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** William Todd Marshall**Signature****Date****Citizenship**

United States

Address (line 1)

113 North Summit Ave

Address (line 2)

Chatham

Address (line 3)

Morris County

Address (line 4)

New Jersey

Address (line 5)

USA

Zip Code

07928

Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor**Name** Partho Pratim Mishra**Signature****Date****Citizenship**

India

Address (line 1)

1201 Helen Drive

Address (line 2)

Millbrae

Address (line 3)

San Mateo County

Address (line 4)

California

Address (line 5)

USA

Zip Code

94030

Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor**Name** Douglas M Nortz**Signature****Date****Citizenship**

United States

Address (line 1)

20 Lombardi Court

Address (line 2)

Red Bank

Address (line 3)

Monmouth County

Address (line 4)

New Jersey

Address (line 5)

USA

Zip Code

07922

Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor**Name** Kadangode K. Ramakrishnan**Signature****Date****Citizenship**

United States

Address (line 1)

9 Highland Circle

Address (line 2)

Berkeley Heights

Address (line 3)

Union County

Address (line 4)

New Jersey

Address (line 5)

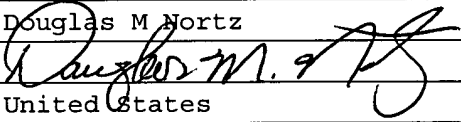
USA

Zip Code

07922

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

DECLARATION**ADDITIONAL INVENTOR(S)****Supplemental Sheet****Page of**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	William Todd Marshall		
Signature		Date	
Citizenship	United States		
Address (line 1)	113 North Summit Ave		
Address (line 2)	Chatham		
Address (line 3)	Morris County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07928		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Partho Pratim Mishra		
Signature		Date	
Citizenship	India		
Address (line 1)	1201 Helen Drive		
Address (line 2)	Millbrae		
Address (line 3)	San Mateo County		
Address (line 4)	California		
Address (line 5)	USA		
Zip Code	94030		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Douglas M. Nortz		
Signature		Date	9/6/00
Citizenship	United States		
Address (line 1)	20 Lombardi Court		
Address (line 2)	Red Bank		
Address (line 3)	Monmouth County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07922		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Kadangode K. Ramakrishnan		
Signature		Date	
Citizenship	United States		
Address (line 1)	9 Highland Circle		
Address (line 2)	Berkeley Heights		
Address (line 3)	Union County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07922		

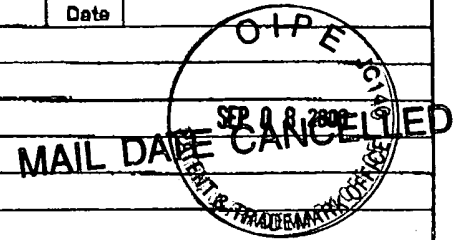
SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231



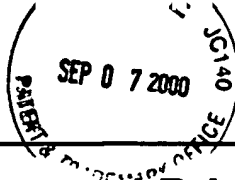
Attorney Docket Number: 2685/5248

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page of

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	William Todd Marshall		
Signature		Date	
Citizenship	United States		
Address (line 1)	113 North Summit Ave		
Address (line 2)	Chatham		
Address (line 3)	Morris County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07928		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Partho Pratim Mishra		
Signature	<i>Partho P. Mishra</i>	Date	9-6-00
Citizenship	India		
Address (line 1)	1201 Helen Drive		
Address (line 2)	Millbrae		
Address (line 3)	San Mateo County		
Address (line 4)	California		
Address (line 5)	USA		
Zip Code	94030		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Douglas M Nortz		
Signature		Date	
Citizenship	United States		
Address (line 1)	20 Lombardi Court		
Address (line 2)	Red Bank		
Address (line 3)	Monmouth County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07922		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	Kadangode K. Ramakrishnan		
Signature		Date	
Citizenship	United States		
Address (line 1)	9 Highland Circle		
Address (line 2)	Berkeley Heights		
Address (line 3)	Union County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07922		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231



DECLARATION -- Supplemental Priority Data Sheet

Additional Foreign Applications:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Provisional applications:

Application Number(s)	Filing Date(MM/DD/YYYY)

Additional U.S. applications:

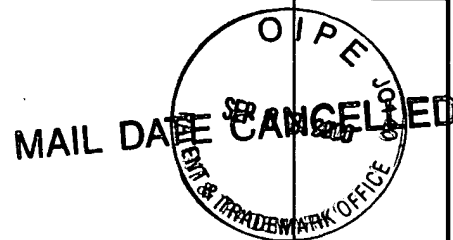
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Attorney Docket Number: 2685/5248

DECLARATION**Registered Practitioner
Information
(Supplemental Sheet)**

Name	Registration Number	Name	Registration Number
STEINMETZ, Alfred G.	22971		



SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231